

**CONTRACT BETWEEN
LEON COUNTY, FLORIDA
AND
STATE OF FLORIDA DEPARTMENT OF HEALTH
FOR OPERATION OF
THE LEON COUNTY HEALTH DEPARTMENT
CONTRACT YEAR 2004-2005**

This agreement ("Agreement") is made and entered into between the State of Florida, Department of Health ("State") and Leon County, Florida ("County"), through their undersigned authorities, effective October 1, 2004.

RECITALS

A. Pursuant to Chapter 154, F.S., the intent of the legislature is to "promote, protect, maintain, and improve the health and safety of all citizens and visitors of this state through a system of coordinated county health department services."

B. County Health Departments were created throughout Florida to satisfy this legislative intent through "promotion of the public's health, the control and eradication of preventable diseases, and the provision of primary health care for special populations."

C. Leon County Health Department ("CHD") is one of the County Health Departments created throughout Florida. It is necessary for the parties hereto to enter into this Agreement in order to assure coordination between the State and the County in the operation of the CHD.

NOW THEREFORE, in consideration of the mutual promises set forth herein, the sufficiency of which are hereby acknowledged, the parties hereto agree as follows:

1. **RECITALS.** The parties mutually agree that the forgoing recitals are true and correct and incorporated herein by reference.
2. **TERM.** The parties mutually agree that this Agreement shall be effective from October 1, 2004, through September 30, 2005, or until a written agreement replacing this Agreement is entered into between the parties, whichever is later, unless this Agreement is otherwise terminated pursuant to the termination provisions set forth in paragraph 8, below.
3. **SERVICES MAINTAINED BY THE CHD.** The parties mutually agree that the CHD shall provide those services as set forth on Part III of Attachment II hereof, in order to maintain the following three levels of service pursuant to Section 154.01(2), Florida Statutes, as defined below:
 - a. "Environmental health services" are those services which are organized and operated to protect the health of the general public by monitoring and regulating activities in the environment which may contribute to the occurrence or transmission of disease. Environmental health services shall be supported by available federal, state and local

funds and shall include those services mandated on a state or federal level. Examples of environmental health services include, but are not limited to, food hygiene, safe drinking water supply, sewage and solid waste disposal, swimming pools, group care facilities, migrant labor camps, toxic material control, radiological health, occupational health.

b. "Communicable disease control services" are those services which protect the health of the general public through the detection, control, and eradication of diseases which are transmitted primarily by human beings. Communicable disease services shall be supported by available federal, state, and local funds and shall include those services mandated on a state or federal level. Such services include, but are not limited to, epidemiology, sexually transmissible disease detection and control, HIV/AIDS, immunization, tuberculosis control and maintenance of vital statistics.

c. "Primary care services" are acute care and preventive services that are made available to well and sick persons who are unable to obtain such services due to lack of income or other barriers beyond their control. These services are provided to benefit individuals, improve the collective health of the public, and prevent and control the spread of disease. Primary health care services are provided at home, in group settings, or in clinics. These services shall be supported by available federal, state, and local funds and shall include services mandated on a state or federal level. Examples of primary health care services include, but are not limited to: first contact acute care services; chronic disease detection and treatment; maternal and child health services; family planning; nutrition; school health; supplemental food assistance for women, infants, and children; home health; and dental services.

4. **FUNDING.** The parties further agree that funding for the CHD will be handled as follows:

a. The funding to be provided by the parties and any other sources are set forth in Part II of Attachment II hereof. This funding will be used as shown in Part I of Attachment II.

i. The State's appropriated responsibility (*direct contribution excluding any state fees, Medicaid contributions or any other funds not listed on the Schedule C*) as provided in Attachment II, Part II is an amount not to exceed \$ 6,197,227.00 (*State General Revenue, Other State Funds and Federal Funds listed on the Schedule C*). The State's obligation to pay under this contract is contingent upon an annual appropriation by the Legislature.

ii. The County's appropriated responsibility (*direct contribution excluding any fees, other cash or local contributions*) as provided in Attachment II, Part II is an amount not to exceed \$ 317,984.00 (*amount listed under the "Board of County Commissioners Annual Appropriations section of the revenue attachment*).

b. Overall expenditures will not exceed available funding or budget authority, whichever is less, (either current year or from surplus trust funds) in any service category. Unless requested otherwise, any surplus at the end of the term of this Agreement in the County Health Department Trust Fund that is attributed to the CHD shall be carried forward to the next contract period.

c. Either party may establish service fees as allowed by law to fund activities of the CHD. Where applicable, such fees shall be automatically adjusted to at least the Medicaid fee schedule. Fees are listed in Attachment II Part II of this contract and in the Environmental Health Fee Schedule that is provided by the Environmental Health Program Office. The estimated annual environmental health fee revenues accruing to the County Health Department Trust Fund are listed on Attachment VI.

d. Either party may increase or decrease funding of this Agreement during the term hereof by notifying the other party in writing of the amount and purpose for the change in funding. If the State initiates the increase/decrease, the CHD will revise the Attachment II and send a copy of the revised pages to the County and the Department of Health, Bureau of Budget Management. If the County initiates the increase/decrease, the County shall notify the CHD. The CHD will then revise the Attachment II and send a copy of the revised pages to the Department of Health, Bureau of Budget Management.

e. The name and address of the official payee to who payments shall be made is:

County Health Department Trust Fund
Leon County
2965 Municipal Way
Tallahassee, FL 32304

5. CHD DIRECTOR/ADMINISTRATOR. Both parties agree the director/administrator of the CHD shall be a State employee or under contract with the State and will be under the day-to-day direction of the Deputy State Health Officer. The director/administrator shall be selected by the State with the concurrence of the County. The director/administrator of the CHD shall insure that non-categorical sources of funding are used to fulfill public health priorities in the community and the Long Range Program Plan. A report detailing the status of public health as measured by outcome measures and similar indicators will be sent by the CHD director/administrator to the parties no later than October 1 of each year (*This is the standard quality assurance "County Health Profile" report located on the Office of Planning, Evaluation & Data Analysis Intranet site.*)

6. ADMINISTRATIVE POLICIES AND PROCEDURES. The parties hereto agree that the following standards should apply in the operation of the CHD:

a. The CHD and its personnel shall follow all State policies and procedures, except to the extent permitted for the use of county purchasing procedures as set forth in subparagraph b., below. All CHD employees shall be State or State-contract personnel subject to State personnel rules and procedures. Employees will report time in the Client Information System/Health Management Component compatible format by program component as specified by the State.

b. The CHD shall comply with all applicable provisions of federal and state laws and regulations relating to its operation with the exception that the use of county purchasing procedures shall be allowed when it will result in a better price or service and no statewide

Department of Health purchasing contract has been implemented for those goods or services. In such cases, the CHD director/administrator must sign a justification therefore, and all county-purchasing procedures must be followed in their entirety, and such compliance shall be documented. Such justification and compliance documentation shall be maintained by the CHD in accordance with the terms of this Agreement. State procedures must be followed for all leases on facilities not enumerated in Attachment IV.

c. The CHD shall maintain books, records and documents in accordance with those promulgated by the Generally Accepted Accounting Principles (GAAP) and Governmental Accounting Standards Board (GASB), and the requirements of federal or state law. These records shall be maintained as required by the Department of Health Policies and Procedures for Records Management and shall be open for inspection at any time by the parties and the public, except for those records that are not otherwise subject to disclosure as provided by law which are subject to the confidentiality provisions of paragraph 6.i., below. Books, records and documents must be adequate to allow the CHD to comply with the following reporting requirements:

- i. The revenue and expenditure requirements in the Florida Accounting System Information Resource (FLAIR).
- ii. The client registration and services reporting requirements of the minimum data set as specified in the most current version of the Client Information System/Health Management Component Pamphlet;
- iii. Financial procedures specified in the Department of Health's Accounting Procedures Manuals, Accounting memoranda, and Comptroller's memoranda;
- iv. The CHD is responsible for assuring that all contracts with service providers include provisions that all subcontracted services be reported to the CHD in a manner consistent with the client registration and service reporting requirements of the minimum data set as specified in the Client Information System/Health Management Component Pamphlet.

d. All funds for the CHD shall be deposited in the County Health Department Trust Fund maintained by the state treasurer. These funds shall be accounted for separately from funds deposited for other CHDs and shall be used only for public health purposes in Leon County.

e. That any surplus/deficit funds, including fees or accrued interest, remaining in the County Health Department Trust Fund account at the end of the contract year shall be credited/debited to the state or county, as appropriate, based on the funds contributed by each and the expenditures incurred by each. Expenditures will be charged to the program accounts by state and county based on the ratio of planned expenditures in the core contract and funding from all sources is credited to the program accounts by state and county. The equity share of any surplus/deficit funds accruing to the state and county is determined each month and at contract year-end. Surplus funds may be applied toward 21

the funding requirements of each participating governmental entity in the following year. However, in each such case, all surplus funds, including fees and accrued interest, shall remain in the trust fund until accounted for in a manner which clearly illustrates the amount which has been credited to each participating governmental entity. The planned use of surplus funds shall be reflected in Attachment II, Part I of this contract, with special capital projects explained in Attachment V.

f. There shall be no transfer of funds between the three levels of services without a contract amendment unless the CHD director/administrator determines that an emergency exists wherein a time delay would endanger the public's health and the Deputy State Health Officer has approved the transfer. The Deputy State Health Officer shall forward written evidence of this approval to the CHD within 30 days after an emergency transfer.

g. The CHD may execute subcontracts for services necessary to enable the CHD to carry out the programs specified in this Agreement. Any such subcontract shall include all aforementioned audit and record keeping requirements.

h. At the request of either party, an audit may be conducted by an independent CPA on the financial records of the CHD and the results made available to the parties within 180 days after the close of the CHD fiscal year. This audit will follow requirements contained in OMB Circular A-133 and may be in conjunction with audits performed by county government. If audit exceptions are found, then the director/administrator of the CHD will prepare a corrective action plan and a copy of that plan and monthly status reports will be furnished to the contract managers for the parties.

i. The CHD shall not use or disclose any information concerning a recipient of services except as allowed by federal or state law or policy.

j. The CHD shall retain all client records, financial records, supporting documents, statistical records, and any other documents (including electronic storage media) pertinent to this Agreement for a period of five (5) years after termination of this Agreement. If an audit has been initiated and audit findings have not been resolved at the end of five (5) years, the records shall be retained until resolution of the audit findings.

k. The CHD shall maintain confidentiality of all data, files, and records that are confidential under the law or are otherwise exempted from disclosure as a public record under Florida law. The CHD shall implement procedures to ensure the protection and confidentiality of all such records and shall comply with sections 384.29, 381.004, 392.65 and 456.057, Florida Statutes, and all other state and federal laws regarding confidentiality. All confidentiality procedures implemented by the CHD shall be consistent with the Department of Health Information Security Policies, Protocols, and Procedures, dated September 1997, as amended, the terms of which are incorporated herein by reference. The CHD shall further adhere to any amendments to the State's security requirements and shall comply with any applicable professional standards of practice with respect to client confidentiality.

I. The CHD shall abide by all State policies and procedures, which by this reference are incorporated herein as standards to be followed by the CHD, except as otherwise permitted for some purchases using county procedures pursuant to paragraph 6.b. hereof.

m. The CHD shall establish a system through which applicants for services and current clients may present grievances over denial, modification or termination of services. The CHD will advise applicants of the right to appeal a denial or exclusion from services, of failure to take account of a client's choice of service, and of his/her right to a fair hearing to the final governing authority of the agency. Specific references to existing laws, rules or program manuals are included in Attachment I of this Agreement.

n. The CHD shall comply with the provisions contained in the Civil Rights Certificate, hereby incorporated into this contract as Attachment III.

o. The CHD shall submit quarterly reports to the county that shall include at least the following:

i. The DE385L1 Contract Management Variance Report and the DE580L1 Analysis of Fund Equities Report;

ii. A written explanation to the county of service variances reflected in the DE385L1 report if the variance exceeds or falls below 25 percent of the planned expenditure amount. However, if the cumulative amount of the variance between actual and planned expenditures does not exceed three percent of the cumulative expenditures for the level of service in which the type of service is included, a variance explanation is not required. A copy of the written explanation shall be sent to the Department of Health, Bureau of Budget Management.

p. The dates for the submission of quarterly reports to the county shall be as follows unless the generation and distribution of reports is delayed due to circumstances beyond the CHD's control:

- i. March 1, 2005 for the report period October 1, 2004 through December 31, 2004;
- ii. June 1, 2005 for the report period October 1, 2004 through March 31, 2005;
- iii. September 1, 2005 for the report period October 1, 2004 through June 30, 2005; and
- iv. December 1, 2005 for the report period October 1, 2004 through September 30, 2005.

7. FACILITIES AND EQUIPMENT. The parties mutually agree that:

- a. CHD facilities shall be provided as specified in Attachment IV to this contract and the county shall own the facilities used by the CHD unless otherwise provided in Attachment IV.
- b. The county shall assure adequate fire and casualty insurance coverage for County-owned CHD offices and buildings and for all furnishings and equipment in CHD offices through either a self-insurance program or insurance purchased by the County.
- c. All vehicles will be transferred to the ownership of the County and registered as county vehicles. The county shall assure insurance coverage for these vehicles is available through either a self-insurance program or insurance purchased by the County. All vehicles will be used solely for CHD operations. Vehicles purchased through the County Health Department Trust Fund shall be sold at fair market value when they are no longer needed by the CHD and the proceeds returned to the County Health Department Trust Fund.

8. TERMINATION.

- a. Termination at Will. This Agreement may be terminated by either party without cause upon no less than one-hundred eighty (180) calendar days notice in writing to the other party unless a lesser time is mutually agreed upon in writing by both parties. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.
- b. Termination Because of Lack of Funds. In the event funds to finance this Agreement become unavailable, either party may terminate this Agreement upon no less than twenty-four (24) hours notice. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery.
- c. Termination for Breach. This Agreement may be terminated by one party, upon no less than thirty (30) days notice, because of the other party's failure to perform an

obligation hereunder. Said notice shall be delivered by certified mail, return receipt requested, or in person to the other party's contract manager with proof of delivery. Waiver of breach of any provisions of this Agreement shall not be deemed to be a waiver of any other breach and shall not be construed to be a modification of the terms of this Agreement.

9. MISCELLANEOUS. The parties further agree:

a. Availability of Funds. If this Agreement, any renewal hereof, or any term, performance or payment hereunder, extends beyond the fiscal year beginning July 1, 2005, it is agreed that the performance and payment under this Agreement are contingent upon an annual appropriation by the Legislature, in accordance with section 287.0582, Florida Statutes.

b. Modification. This Agreement and its Attachments contain all of the terms and conditions agreed upon between the parties. Modifications of this Agreement shall be enforceable only when reduced to writing and signed by all parties.

c. Contract Managers. The name and address of the contract managers for the parties under this Agreement are as follows:

For the State:

Arthur P. Cooper, M.P.H.
Name

Administrator, Leon CHD
Title

2965 Municipal Way

Tallahassee, FL 32304
Address

(850) 487-3162
Telephone

For the County:

Parwez Alam
Name

County Administrator
Title

301 South Monroe

Tallahassee, Florida 32301
Address

(850) 487-4710
Telephone

If different contract managers are designated after execution of this Agreement, the name, address and telephone number of the new representative shall be furnished in writing to the other parties and attached to originals of this Agreement.

d. Captions. The captions and headings contained in this Agreement are for the convenience of the parties only and do not in any way modify, amplify, or give additional notice of the provisions hereof.

In WITNESS THEREOF, the parties hereto have caused this 38 page agreement to be executed by their undersigned officials as duly authorized effective the 1st day of October, 2004.

LEON COUNTY, FLORIDA

STATE OF FLORIDA

DEPARTMENT OF HEALTH

SIGNED BY:

SIGNED BY:

NAME: Jane Sauls

NAME: John O. Agwunobi, M.D., M.B.A.

TITLE Board of County Commissioners

TITLE: Secretary

DATE:

DATE:

ATTESTED TO:

SIGNED BY:

SIGNED BY:

NAME: Bob Inzer, Clerk of the

NAME: Arthur P. Cooper, M.P.H.

TITLE: Leon County Florida

TITLE: CHD Director/Administrator

DATE:

APPROVED AS TO FORM:

SIGNED BY:

NAME : Herbert W.A. Thiele Esq., County

Leon County Attorney's Office

DATE: _____

ATTACHMENT I

LEON COUNTY HEALTH DEPARTMENT

**PROGRAM SPECIFIC REPORTING REQUIREMENTS AND PROGRAMS REQUIRING
COMPLIANCE WITH THE PROVISIONS OF SPECIFIC MANUALS**

Some health services must comply with specific program and reporting requirements in addition to the Personal Health Coding Pamphlet (DHP 50-20), Environmental Health Coding Pamphlet (DHP 50-21) and FLAIR requirements because of federal or state law, regulation or rule. If a county health department is funded to provide one of these services, it must comply with the special reporting requirements for that service. The services and the reporting requirements are listed below:

<u>Service</u>	<u>Requirement</u>
1. Sexually Transmitted Disease Program	Requirements as specified in FAC 64D-3 and F.S. 384 and the CHD Guidebook Internal Operating Policy STD 6 and 7.
2. Dental Health	Monthly reporting on DH Form 1008*.
3. Special Supplemental Nutrition Program for Women, Infants and Children.	Service documentation and monthly financial reports as specified in DHM 150-24* and all federal, state and county requirements detailed in program manuals and published procedures.
4. Healthy Start/ Improved Pregnancy Outcome	Requirements as specified in the Healthy Start Standards and Guidelines 1998 and as specified by the Health Start Coalitions in contract with each county health department.
5. Family Planning	Periodic financial and programmatic reports as specified by the program office and in the CHD Guidebook, Internal Operating Policy FAMPLAN 14*
6. Immunization	Periodic reports as specified by the department regarding the surveillance/investigation of reportable vaccine preventable diseases, vaccine usage accountability, the assessment of various immunization levels and forms reporting adverse events following immunization and Immunization Module quarterly quality audits and duplicate data reports.
7. Chronic Disease Program	Requirements as specified in the Community Intervention Program (CIP) and the CHD Guidebook.
8. Environmental Health	Requirements as specified in DHP 50-4* and 50-21*
9. HIV/AIDS Program	Requirements as specified in Florida Statute 384.25 and 64D-3.016 and 3.017 F.A.C. and the CHD Guidebook. Case reporting on CDC Forms 50.42B (Adult/ Adolescent) and 50.42A (Pediatric). Socio-demographic data on persons tested for HIV in CHD clinics should be reported on Lab Request Form 1628 or Post-Test Counseling Form 1633. These reports are to be sent to the Headquarters HIV/AIDS office within 5 days of the initial post-test counseling appointment or within 90 days of the missed post-test counseling appointment.

ATTACHMENT I (Continued)

10. School Health Services HRSM 150-25*, including the requirement for an annual plan as a condition for funding.

*or the subsequent replacement if adopted during the contract period.

ATTACHMENT II

LEON COUNTY HEALTH DEPARTMENT

PART I: PLANNED USE OF COUNTY HEALTH DEPARTMENT TRUST FUND BALANCES

	Estimated State Share of CHD Trust Fund Balance as of 09/30/04	Estimated County Share of CHD Trust Fund Balance as of 09/30/04	Total
1. CHD Trust Fund Ending Balance 09/30/04	1,208,926	213,340	1,422,266
2. Drawdown for Contract Year October 1, 2004 to September 30, 2005		0	
3. Special Capital Project use for Contract Year October 1, 2004 to September 30, 2005	638,463		638,463
4. Balance Reserved for Contingency Fund October 1, 2004 to September 30, 2005	570,463	213,340	783,803

Note: The total of items 2, 3 and 4 must equal the ending balance in item 1.

Special Capital Projects are new construction or renovation projects and new furniture or equipment associated with these projects, and mobile health vans.

Pursuant to 154.02, F.S., At a minimum, the trust fund shall consist of: an operating reserve, consisting of 8.5 percent of the annual operating budget, maintained to ensure adequate cash flow from nonstate revenue sources.

12

ATTACHMENT II

LEON COUNTY HEALTH DEPARTMENT
Part II: Sources of Contributions to County Health Department

October 1, 2004 to September 30, 2005

		State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Contributions by Type (cash)	Total (cash)
1. GENERAL REVENUE - STATE						
015011	ALG/CONTRIBUTION TO CHDS-PRIMARY CARE	28,568	0	28,568	0	28,568
015011	ALG/PRIMARY CARE	369,688	0	369,688	0	369,688
015011	PRIMARY CARE SPECIAL PROJECT	0	0	0	0	0
015048	ALG/CONTR TO CHDS-STD PROGRAM	29,232	0	29,232	0	29,232
015050	ALG/CESSPOOL IDENTIFICATION AND ELIMINATION	0	0	0	0	0
015050	ALG/CONTR TO CHDS	2,444,592	0	2,444,592	0	2,444,592
015050	ALG/CONTR TO CHDS-MIGRANT LABOR CAMP SANITATION	644	0	644	0	644
015050	ALG/CONTR. TO CHDS-DENTAL PROGRAM	34,100	0	34,100	0	34,100
015050	ALG/CONTR. TO CHDS-IMMUNIZATION OUTREACH TEAMS	11,855	0	11,855	0	11,855
015050	ALG/CONTR. TO CHDS-INDOOR AIR ASSIST PROG	0	0	0	0	0
015050	ALG/CONTR. TO CHDS-SOVEREIGN IMMUNITY	0	0	0	0	0
015050	CITIZENS AGAINST TOXIC EXPOSURE (CATE)	0	0	0	0	0
015050	COMMUNITY TB PROGRAM	148,668	0	148,668	0	148,668
015050	CONTR TO CHDS - DUVAL TEEN PREGNANCY PREVENTION	0	0	0	0	0
015050	HEALTH PROMOTION & EDUCATION INITIATIVES	58,823	0	58,823	0	58,823
015050	HEALTHY BEACHES MONITORING	0	0	0	0	0
015050	LA LIGA CONTRA EL CANCER	0	0	0	0	0
015050	METRO ORLANDO URBAN LEAGUE TEENAGE PREG PREV	0	0	0	0	0
015050	RED LEGISLATION - GAP GRANT (CAT 050310)	0	0	0	0	0
015050	SPECIAL NEEDS SHELTER PROGRAM	0	0	0	0	0
015065	ALG/CONTR TO CHDS-AIDS PATIENT CARE	175,810	0	175,810	0	175,810
015065	ALG/CONTR TO CHDS-AIDS PREV & SURV & FIELD STAFF	90,075	0	90,075	0	90,075
015115	VOLUNTEER SCHOOL HEALTH NURSE GRANT	0	0	0	0	0
015123	ALG/FAMILY PLANNING	111,120	0	111,120	0	111,120
015124	ALG/IPO - OUTREACH SOCIAL WORKERS CAT. 050707	25,208	0	25,208	0	25,208
015124	ALG/IPO HEALTHY START	0	0	0	0	0
015124	ALG/IPO HEALTHY START/IPO CAT 050707	0	0	0	0	0
015124	ALG/IPO-INFANT MORTALITY PROJECT CAT. 050707	0	0	0	0	0
015124	ALG/MCH HEALTHY START/IPO CAT 050870	0	0	0	0	0
015124	ALG/MCH-INFANT MORTALITY PROJECT CAT. 050870	0	0	0	0	0
015124	ALG/MCH-OUTREACH SOCIAL WORKERS CAT 050870	0	0	0	0	0
015137	ALG/CONTR. TO CHDS-MCH HEALTH - FIELD STAFF COST	0	0	0	0	0
015137	HEALTHY START - DATA COLLECTION PROJECT STAFF	0	0	0	0	0
015140	ALG/SCHOOL HEALTH/SUPPLEMENTAL	71,248	0	71,248	0	71,248
GENERAL REVENUE TOTAL		3,599,631	0	3,599,631	0	3,599,631
2. NON GENERAL REVENUE - STATE						
011008	RAPID AIDS TESTING - JAIL INMATES 2003	0	0	0	0	0
015010	ALG/CONTR TO CHDS-REBASING TOBACCO TF	26,872	0	26,872	0	26,872
015010	ENHANCED DENTAL SERVICES TOBACCO TF	0	0	0	0	0
015010	FL HEPATITIS & LIVER FAILURE PREVENTION/CONTROL	0	0	0	0	0
015010	ONSITE SEWAGE SPECIAL PROJECT-ATF	0	0	0	0	0
015010	PACE EH	0	0	0	0	0
015010	SUPER ACT PROGRAM ADM TF	0	0	0	0	0
015020	FOOD AND WATERBORNE DISEASE PROGRAM ADM TF	0	0	0	0	0
015026	ALG/CONTR. TO CHDS-BIOMEDICAL WASTE/DEP ADM TF	11,951	0	11,951	0	11,951
015072	ALG/CONTR. TO CHDS-SAFE DRINKING WATER PRG/DEP ADM	0	0	0	0	0
015084	VARICELLA IMMUNIZATION REQUIREMENT TOBACCO TF	6,345	0	6,345	0	6,345

ATTACHMENT II

LEON COUNTY HEALTH DEPARTMENT
Part II: Sources of contributions to County Health Department

October 1, 2004 to September 30, 2005

		State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Contribution	Total
2. NON GENERAL REVENUE - STATE						
015172	FULL SERVICE SCHOOLS - TOBACCO TF	123,039	0	123,039	0	123,039
015174	BASIC SCHOOL HEALTH - TOBACCO TF	110,468	0	110,468	0	110,468
	NON GENERAL REVENUE TOTAL	278,675	0	278,675	0	278,675
3. FEDERAL FUNDS - State						
007000	ARTHRITIS SELF-HELP COURSE	0	0	0	0	0
007000	CHILDHOOD LEAD POISONING PREVENTION	0	0	0	0	0
007000	PUBLIC HEALTH PREPAREDNESS INDIRECT	30,000	0	30,000	0	30,000
007000	FEDERAL COASTAL BEACH MONITORING PROGRAM	0	0	0	0	0
007000	GULF OF MEXICO PROGRAM- TAYLOR CHD	0	0	0	0	0
007000	STATE PROGRAMS TO PREVENT OBESITY 2003-04	0	0	0	0	0
007030	PHBG/MIGRANT LABOR CAMP SANITATION	444	0	444	0	444
007049	STD PROGRAM-CSPS	1,250	0	1,250	0	1,250
007049	STD PROGRAM-CSPS-2005	1,250	0	1,250	0	1,250
007049	STD PROGRAM-INFERTILITY PROJECT	0	0	0	0	0
007049	STD PROGRAM-MED & LAB SVCS TRNG CNTR	0	0	0	0	0
007049	STD PROGRAM-SYPHILIS ELIMINATION PROJECT	0	0	0	0	0
007049	STD/HIV PREVENTION TRAINING CENTER	0	0	0	0	0
007051	FGTF/WIC ADMINISTRATION	928,140	0	928,140	0	928,140
007056	HEALTH PROGRAM FOR REFUGEES	0	0	0	0	0
007056	REFUGEE HEALTH TB TARGETED TESTING	0	0	0	0	0
007063	PHBG/COMPREHENSIVE COMM CARDIO HLTH PRGM	0	0	0	0	0
007064	AIDS SEROPREVALENCE	0	0	0	0	0
007064	EVAL INTEG HIV/AIDS SURV SYST PERFORMANCE	7,055	0	7,055	0	7,055
007064	FGTF/AIDS SURVEILLANCE	0	0	0	0	0
007065	AIDS PREVENTION	280,972	0	280,972	0	280,972
007066	FGTF/RYAN WHITE	66,355	0	66,355	0	66,355
007066	FGTF/RYAN WHITE - EMERGING COMMUNITIES	0	0	0	0	0
007066	FGTF/RYAN WHITE-AIDS DRUG ASSIST PROG-ADMIN	24,737	0	24,737	0	24,737
007066	FGTF/RYAN WHITE-CONSORTIA	0	0	0	0	0
007067	TUBERCULOSIS CONTROL - FEDERAL GRANT	0	0	0	0	0
007068	FGTF/AIDS INMATE INTERVENTION	0	0	0	0	0
007077	BIOTERR SURVEILLANCE & EPIDEMIOLOGY	91,094	0	91,094	0	91,094
007077	BIOTERRORISM - HOSPITAL PREPAREDNESS 2004-05	0	0	0	0	0
007077	BIOTERRORISM NETWORK COMMUNICATIONS	0	0	0	0	0
007077	BIOTERRORISM PLANNING & READINESS	481,934	0	481,934	0	481,934
007077	PUB HLTH PREP-EDUCATION & TRAINING	0	0	0	0	0
007084	FGTF/IMMUNIZATION ACTION PLAN	9,365	0	9,365	0	9,365
007084	FGTF/IMMUNIZATION-PROJECT FIELD STAFF	16,191	0	16,191	0	16,191
007084	FGTF/IMMUNIZATION-WIC LINKAGES	0	0	0	0	0
007084	IMMUNIZATION ACTION PLAN 2004-2005	8,897	0	8,897	0	8,897
007084	IMMUNIZATION FIELD STAFF 2004	16,191	0	16,191	0	16,191
007084	IMMUNIZATION PROJECT - VFC	0	0	0	0	0
007084	IMMUNIZATION SPECIAL PROJECT	5,732	0	5,732	0	5,732
007084	IMMUNIZATION SUPPLEMENTAL - 2004	0	0	0	0	0
007084	IMMUNIZATION SUPPORT GRANT - 2005	0	0	0	0	0
007085	FGTF/BREAST & CERVICAL CANCER-ADMIN/CASE MAN	43,550	0	43,550	0	43,550
007127	MCH BGTF-MCH/CHILD HEALTH	14,584	0	14,584	0	14,584

APPENDIX E
LEON COUNTY HEALTH DEPARTMENT
STATE OF FLORIDA Contributions to County Health Department

October 1, 2004 to September 30, 2005

		State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Contributions (cash)	Total (cash)
--	--	-----------------------------------	------------------------------------	-----------------------------------	-------------------------	-----------------

3. FEDERAL FUNDS - STATE

007132	MCH BGTF-MCH/DENTAL PROJECTS	0	0	0	0	0
007133	FGTF/FAMILY PLANNING TITLE X SPECIAL INITIATIVES	0	0	0	0	0
007133	FGTF/FAMILY PLANNING-TITLE X	148,309	0	148,309	0	148,309
007134	MCH BGTF-GADSDEN SCHOOL CLINIC	0	0	0	0	0
007134	MCH BGTF-HEALTHY START IPO	0	0	0	0	0
007134	MCH BGTF-INFANT MORTALITY PROJECT	0	0	0	0	0
007134	MCH BGTF-OUTREACH SOCIAL WORKERS	0	0	0	0	0
007135	FGTF/ABSTINENCE EDUCATION PROGRAM	0	0	0	0	0
015009	Transfer of Federal Funds Within Agency	0	0	0	0	0
015021	MEDIPASS WAIVER-HLTHY STRT CLIENT SERVICES	612,459	0	612,459	0	612,459
015021	MEDIPASS WAIVER-SOBRA	65,833	0	65,833	0	65,833
015060	Entrant Reimbursement Transfer	0	0	0	0	0
015075	FULL SERVICE SCHOOLS-TANF	14,444	0	14,444	0	14,444
015075	SCHOOL HEALTH-SUPPLEMENT-TANF	19,803	0	19,803	0	19,803
015075	TITLEXXI/SCHOOL HEALTH/SUPPLEMENTAL	138,624	0	138,624	0	138,624
FEDERAL FUNDS TOTAL		3,027,213	0	3,027,213	0	3,027,213

4. FEES ASSESSED BY STATE OR FEDERAL RULES - STATE

001092	Environmental Health Fees	232,325	0	232,325	0	232,325
001092	OSDS Repair Permit	0	0	0	0	0
001092	OSDS Permit Fee	0	0	0	0	0
001092	I & M Zoned Operating Permit	0	0	0	0	0
001092	Aerobic Operating Permit	0	0	0	0	0
001092	Septic Tank Site Evaluation	0	0	0	0	0
001113	Mobile Home and Parks	10,000	0	10,000	0	10,000
001132	Food Hygiene Permit	31,300	0	31,300	0	31,300
001135	OSDS Variance Fee	0	0	0	0	0
001139	Migrant Housing Permit	500	0	500	0	500
001140	Biohazard Waste Permit	8,000	0	8,000	0	8,000
001142	Non SDWA Lab Sample	0	0	0	0	0
001144	Tanning Facilities	8,000	0	8,000	0	8,000
001145	Swimming Pools	49,140	0	49,140	0	49,140
001149	Body Piercing	927	0	927	0	927
001165	Private Water Constr Permit	0	0	0	0	0
001166	Public Water Annual Oper Permit	4,000	0	4,000	0	4,000
001166	Public Water Constr Permit	0	0	0	0	0
001166	Non-SDWA System Permit	0	0	0	0	0
001170	Lab Fee Chemical Analysis	0	0	0	0	0
001196	Water Analysis-Potable	0	0	0	0	0
001197	Nonpotable Water Analysis	0	0	0	0	0
001211	Safe Drinking Water	0	0	0	0	0
010403	Fees-Copy of Public Doc	0	0	0	0	0
015052	Transfers-Mobile Home/RV Park	0	0	0	0	0
FEES ASSESSED BY STATE OR FEDERAL RULES TOTAL		344,192	0	344,192	0	344,192

5. OTHER CASH CONTRIBUTIONS - STATE

010304	Stationary Pollutant Storage Tanks	200	0	200	21	200
--------	------------------------------------	-----	---	-----	----	-----

LEON COUNTY HEALTH DEPARTMENT
Partial Sources of Contributions in County Health Department

October 1, 2004 to September 30, 2005

		State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Contributions from Other Sources
5. OTHER CASH CONTRIBUTIONS - STATE					
015029	Transfers Intra Agency	0	0	0	0
015121	Super Act Reimbursements	4,500	0	4,500	0
015139	Well Surveillance Reimbursement - Pesticide	0	0	0	0
090001	Draw down from Public Health Unit	0	0	0	0
OTHER CASH CONTRIBUTIONS TOTAL		4,700	0	4,700	0
6. MEDICAID - STATE/COUNTY					
001056	CHD Incm:Medicaid-Pharmacy	0	0	0	0
001076	Medicaid-TB	0	0	0	0
001078	Medicaid-Administration Vaccine	0	0	0	0
001079	Medicaid-Case Management	0	0	0	0
001080	CHD Incm:Medicaid-Other	62	88	150	0
001081	CHD Incm:Medicaid-Child Health Checkup	493	707	1,200	0
001082	CHD Incm:Medicaid-Dental	226,050	323,950	550,000	0
001083	CHD Incm:Medicaid-FP	7,000	63,000	70,000	0
001085	CHD Incm:Medicaid-Nursing	0	0	0	0
001087	CHD Incm:Medicaid-STD	0	0	0	0
001089	Medicaid AIDS	0	0	0	0
001147	Medicaid HMO Rate	0	0	0	0
001191	CHD Incm:Medicaid Maternity	14,385	20,615	35,000	0
001192	CHD Incm:Medicaid Comp. Child	0	0	0	0
001193	CHD Incm:Medicaid Comp. Adult	1,644	2,356	4,000	0
001194	Medicaid-LAB	0	0	0	0
001208	Medipass \$3.00 Adm. Fee	0	0	0	0
MEDICAID TOTAL		249,634	410,716	660,350	0
7. ALLOCABLE REVENUE - STATE					
018001	Refunds, Salary	0	0	0	0
018003	Refunds, other Personal Services	0	0	0	0
018004	Refunds, Expenses	0	0	0	0
018006	Refunds, Operating Capital Outlay	0	0	0	0
018010	Refunds, Special Category	0	0	0	0
018011	Refunds, Other	0	0	0	0
018013	DMS Refunds by Journal Transfer-65900	0	0	0	0
018099	Refunds, Certified Forward	0	0	0	0
037000	Prior Year Warrant	0	0	0	0
038000	12 Month Old Warrant	0	0	0	0
ALLOCABLE REVENUE TOTAL		0	0	0	0
8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND - STATE					
	State Pharmacy Services	0	0	0	238,265
	State Laboratory Services	0	0	0	287,267
	State TB Services	0	0	0	0
	State Immunization Services	0	0	0	112,426
	State STD Services	0	0	0	120,327
	State Construction/Renovation	0	0	0	0
	WIC Food	0	0	0	3,065,233
					24
					3,065,233

ATTACHMENT H

ELGIN COUNTY FINANCIAL REPORT
Part I - Sources of Contributions to County Health Department

October 1, 2004 to September 30, 2005

	State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Contributions (cash)	Total (cash)
8. OTHER STATE CONTRIBUTIONS NOT IN CHD TRUST FUND - STATE					
Other (specify)	0	0	0	0	0
Other (specify)	0	0	0	0	0
Other (specify)	0	0	0	0	0
Other (specify)	0	0	0	0	0
OTHER STATE CONTRIBUTIONS TOTAL	0	0	0	3,823,518	3,823,518
9. DIRECT COUNTY CONTRIBUTIONS - COUNTY					
008030 Grants-County Tax Direct	0	0	0	0	0
008034 Grants Cnty Commsn Other	0	317,984	317,984	0	317,984
BOARD OF COUNTY COMMISSIONERS TOTAL	0	317,984	317,984	0	317,984
10. FEES AUTHORIZED BY COUNTY ORDINANCE OR RESOLUTION - COUNTY					
001004 Child Car Seat Prog	0	0	0	0	0
001060 Vital Statistics Fees Other	0	0	0	0	0
001062 Rabies Vaccine	0	0	0	0	0
001074 Adult Enter. Permit Fees	0	0	0	0	0
001077 Primary Care Fees	0	7,850	7,850	0	7,850
001093 Communicable Disease Fees	0	127,300	127,300	0	127,300
001094 Environmental Health Fees	0	18,050	18,050	0	18,050
001114 New Birth Certificates	0	65,000	65,000	0	65,000
001115 Death Certificates	0	90,000	90,000	0	90,000
001117 Vital Stats-Adm. Fee 50 cents	0	0	0	0	0
FEES AUTHORIZED BY COUNTY TOTAL	0	308,200	308,200	0	308,200
11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY					
001009 Debit Memo-Bad Checks	0	0	0	0	0
001010 Recovery-Bad Checks	0	0	0	0	0
001015 Recovery of Collection of Agency Placements	0	0	0	0	0
001026 Returned Check Fee	0	0	0	0	0
001029 Third Party Reimbursement	0	20,000	20,000	0	20,000
001072 Ryan White Title I	0	0	0	0	0
001073 Ryan White Title II	0	0	0	0	0
001075 Ryan White Title III	0	0	0	0	0
001090 Medicare	0	1,700	1,700	0	1,700
001190 Health Maintenance Organ. (HMO)	0	0	0	0	0
005040 Interest Earned	0	0	0	0	0
005041 Interest Earned-State Investment Account	0	14,000	14,000	0	14,000
007010 U.S. Grants Direct	0	0	0	0	0
008010 Grants Contracts Frm Cities Direct	0	0	0	0	0
008031 County AIDS Education	0	0	0	0	0
008050 Grants-Cnty Sch Board Direct	0	0	0	0	0
008090 Grants other Local Govn't Direct	0	15,000	15,000	0	15,000
008094 Grnts/Contracts other Agencies Direct	0	21,000	21,000	0	21,000
008095 Grants Cnty Sect 403.102 Air Pol	0	0	0	0	0
008099 Reimb/Rebate Local Govn't	0	0	0	0	0
010300 Sale of Goods and Services	0	0	0	0	0
010301 Exp Witness Fee Consultnt Charges	0	0	0	0	0

ATTACHMENT H
LEON COUNTY DEPARTMENTAL REPORT
Part II: Sources of Contributions to County Health Department

October 1, 2004 to September 30, 2005

		State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Other Contributions (cash)	Total (cash)
11. OTHER CASH AND LOCAL CONTRIBUTIONS - COUNTY						
010403	Fees-Copies of Documents	0	0	0	0	0
010405	Sale of pharmaceuticals	0	0	0	0	0
010408	Copy Fess Intra/Inter Agency	0	0	0	0	0
010409	Sale of Goods Outside State Government	0	0	0	0	0
010500	Sales of Services Outside State Government	0	0	0	0	0
011001	Healthy Start Coalition Contributions	0	0	0	0	0
011007	Cash Donations Private	0	0	0	0	0
011066	Ryan White Local Revenues	0	0	0	0	0
011067	AIDS Insurance Continuation Project	0	0	0	0	0
011099	Other Grants/Donations Direct	0	2,300	2,300	0	2,300
012020	Fines and Forfeitures	0	0	0	0	0
012021	Return Check Charge	0	0	0	0	0
028020	Insurance Recoveries-Other	0	0	0	0	0
090002	Draw down from Public Health Unit	0	0	0	0	0
OTHER CASH AND LOCAL CONTRIBUTIONS TOTAL		0	74,000	74,000	0	74,000
12. ALLOCABLE REVENUE - COUNTY						
018001	Refunds, Salary	0	0	0	0	0
018003	Refunds, other Personal Services	0	0	0	0	0
018004	Refunds, Expenses	0	0	0	0	0
018006	Refunds, Operating Capital Outlay	0	0	0	0	0
018010	Refunds, Special Category	0	0	0	0	0
018011	Refunds, Other	0	0	0	0	0
018013	DMS Refunds by Journal Transfer-65900	0	0	0	0	0
018099	Refunds, Certified Forward	0	0	0	0	0
037000	Prior Year Warrant	0	0	0	0	0
038000	12 Month Old Warrant	0	0	0	0	0
COUNTY ALLOCABLE REVENUE TOTAL		0	0	0	0	0
13. BUILDINGS - COUNTY						
	Annual Rental Equivalent Value	0	0	0	0	0
	Maintenance	0	0	0	0	0
	Other (specify)	0	0	0	0	0
	Other (specify)	0	0	0	0	0
	Other (specify)	0	0	0	0	0
	Other (specify)	0	0	0	0	0
	Other (specify)	0	0	0	0	0
BUILDINGS TOTAL		0	0	0	0	0
14. OTHER COUNTY CONTRIBUTIONS NOT IN CHD TRUST FUND - COUNTY						
	Other County Contribution of some unknown origin	0	0	0	0	0
	Other County Contribution (specify)	0	0	0	0	0
	Other County Contribution (specify)	0	0	0	0	0
	Other County Contribution (specify)	0	0	0	0	0
	Other County Contribution (specify)	0	0	0	0	0
OTHER COUNTY CONTRIBUTIONS TOTAL		0	0	0	0	0

ATTACHMENT I

**LIBRARY COUNTY HEALTH DEPARTMENT
Part II: Sources of contributions to County Health Department**

October 1, 2004 to September 30, 2005

	State CHD Trust Fund (cash)	County CHD Trust Fund (cash)	Total CHD Trust Fund (cash)	Other Contributions	Total Contributions
GRAND TOTAL CHD PROGRAM	7,504,045	1,110,900	8,614,945	3,823,518	12,438,463

WICHITA COUNTY
HEALTH DEPARTMENT

Annual Financial Statement - Capital Outlays and Expenditures Program Summary for the Year Ended September 30, 2005

October 1, 2004 to September 30, 2005

Quarterly Expenditure Plan

ITEM	Open	Units	Service	1ST QUARTER	2ND QUARTER	3RD QUARTER	4TH QUARTER	TOTAL	SPLIT
	(0.00)								

A. COMMUNICABLE DISEASE CONTROL:

Vital Statistics (180)	4.00	0	0	45,820	45,820	45,819	45,819	183,278	0	183,278
Immunization (101)	8.00	6,000	12,000	101,562	101,562	101,562	101,562	83,353	322,895	406,248
STD (102)	16.50	2,400	15,000	149,595	149,595	149,594	149,595	4,000	594,379	598,379
A.I.D.S. (103)	5.00	1,800	2,700	215,467	215,467	215,466	215,466	39,749	822,117	861,866
TB Control Services (104)	3.00	500	4,000	55,083	55,083	55,083	55,084	3,000	217,333	220,333
Comm. Disease Surv. (106)	3.00	0	550	33,980	33,980	33,980	33,980	0	135,920	135,920
Hepatitis Prevention (109)	0.00	0	0	0	0	0	0	0	0	0
Public Health Preparedness and Response (116)	8.00	0	0	122,181	122,181	122,181	122,182	0	488,725	488,725
COMMUNICABLE DISEASE SUBTOTAL	47.50	10,700	34,250	723,688	723,688	723,685	723,688	313,380	2,581,369	2,894,749

B. PRIMARY CARE:

Improved Pregnancy Outcome (225)	7.45	600	4,000	77,019	77,019	77,019	77,019	21,000	287,076	308,076
Family Planning (223)	15.80	5,000	20,000	212,764	212,764	212,764	212,763	74,473	776,582	851,055
Healthy Start Prenatal (227)	9.15	2,000	22,000	119,168	119,168	119,167	119,167	0	476,670	476,670
Comprehensive Child Health (229)	4.00	250	1,000	57,922	57,922	57,922	57,922	30,977	200,711	231,688
Healthy Start Infant (231)	5.40	1,100	7,300	73,642	73,642	73,641	73,641	0	294,566	294,566
School Health (234)	14.75	0	79,000	254,164	187,498	187,497	187,497	25,911	790,745	816,656
Comprehensive Adult Health (237)	1.95	1,100	3,700	48,139	48,139	48,139	48,139	134,530	58,026	192,556
Dental Health (240)	7.00	3,500	18,000	180,420	180,420	180,420	180,420	265,395	456,285	721,680
Chronic Disease Services (210)	1.00	0	0	18,406	18,406	18,406	18,405	0	73,623	73,623
Tobacco Prevention (212)	0.00	0	0	0	0	0	0	0	0	0
Home Health (215)	0.00	0	0	0	0	0	0	0	0	0
W.I.C. (221)	27.00	4,876	18,000	266,648	266,648	266,647	266,647	0	1,066,590	1,066,590
PRIMARY CARE SUBTOTAL	93.50	18,426	173,000	1,308,292	1,241,626	1,241,622	1,241,620	552,286	4,480,874	5,033,160

C. ENVIRONMENTAL HEALTH:

Water and Onsite Sewage Programs										
Coastal Beach Monitoring (347)	0.00	0	0	0	0	0	0	0	0	0
Limited Use Public Water Systems (357)	0.20	85	290	3,160	3,160	3,160	3,160	0	12,640	12,640
Public Water System (358)	0.00	0	0	0	0	0	0	0	0	0
Private Water System (359)	0.00	0	0	0	0	0	0	0	0	0
Individual Sewage Disp. (361)	4.97	1,314	3,600	74,556	74,556	74,556	74,556	135,203	163,021	298,224
Group Total	5.17	1,399	3,890	77,716	77,716	77,716	77,716	135,203	175,661	310,864
Facility Programs										
Food Hygiene (348)	1.36	259	1,084	18,013	18,013	18,013	18,013	0	72,052	72,052
Body Art (349)	0.01	10	10	152	152	152	152	0	608	608
Group Care Facility (351)	2.65	673	1,700	39,028	39,028	39,028	39,028	84,430	71,682	156,112
Migrant Labor Camp (352)	0.00	0	0	0	0	0	0	0	0	0
Housing, Public Bldg Safety, Sanitation (353)	0.00	0	0	0	0	0	0	0	0	0
Mobile Home and Parks Services (354)	0.22	76	205	3,025	3,025	3,025	3,025	0	12,100	12,100
Swimming Pools/Bathing (360)	1.32	316	916	0	0	33,500	33,500	0	67,000	67,000
Biomedical Waste Services (364)	0.45	290	451	6,246	6,246	6,246	6,246	0	24,984	24,984
Tanning Facility Services (369)	0.20	36	89	2,554	2,554	2,554	2,554	0	10,216	10,216

IRON COUNTY HEALTH DEPARTMENT

PACIFIC NORTHWEST STANDARDS STATEMENT OF EXPENDITURE - QUARTERLY EXPENDITURE PLAN

October 1, 2004 to September 30, 2005

Quarterly Expenditure Plan

	Rate (0.00)	Quantity Units	Services	Budget Amount (Whole dollars only)	Actual Amount (Whole dollars only)	Variance (Whole dollars only)	Budget Amount (Whole dollars only)	Actual Amount (Whole dollars only)	Variance (Whole dollars only)	Budget Amount (Whole dollars only)	Actual Amount (Whole dollars only)
C. ENVIRONMENTAL HEALTH:											
Group Total	6.21	1,660	4,455	69,018	69,018	0	102,518	102,518	0	84,430	258,642
Groundwater Contamination											
Storage Tank Compliance (355)	0.00	0	0	0	0	0	0	0	0	0	0
Super Act Service (356)	0.05	0	100	790	790	0	790	790	0	3,160	3,160
Group Total	0.05	0	100	790	790	0	790	790	0	3,160	3,160
Community Hygiene											
Occupational Health (344)	0.00	0	0	0	0	0	0	0	0	0	0
Consumer Product Safety (345)	0.00	0	0	0	0	0	0	0	0	0	0
Emergency Medical (346)	0.00	0	0	0	0	0	0	0	0	0	0
Lead Monitoring Services (350)	0.00	0	0	0	0	0	0	0	0	0	0
Public Sewage (362)	0.00	0	0	0	0	0	0	0	0	0	0
Solid Waste Disposal (363)	0.00	0	0	0	0	0	0	0	0	0	0
Sanitary Nuisance (365)	0.49	250	750	7,327	7,327	0	7,327	7,327	0	25,601	3,707
Rabies Surveillance/Control Services (366)	0.00	0	0	0	0	0	0	0	0	0	0
Arbovirus Surveillance (367)	0.01	0	150	158	158	0	158	158	0	632	632
Rodent/Arthropod Control (368)	0.00	0	0	0	0	0	0	0	0	0	0
Water Pollution (370)	0.00	0	0	0	0	0	0	0	0	0	0
Air Pollution (371)	0.00	0	0	0	0	0	0	0	0	0	0
Radiological Health (372)	0.00	0	0	0	0	0	0	0	0	0	0
Toxic Substances (373)	0.00	0	0	0	0	0	0	0	0	0	0
Group Total	0.50	250	900	7,485	7,485	0	7,485	7,485	0	25,601	4,339
ENVIRONMENTAL HEALTH SUBTOTAL	11.93	3,309	9,345	155,009	155,009	0	188,509	188,509	0	245,234	441,802
D. SPECIAL CONTRACTS:											
Special Contracts (599)	0.00	0	0	0	0	0	0	0	0	0	0
SPECIAL CONTRACTS SUBTOTAL	0.00	0	0	0	0	0	0	0	0	0	0
TOTAL CONTRACT	152.93	32,435	216,595	2,186,989	2,120,323	66,666	2,153,816	2,153,817	1,110,900	7,504,045	8,614,945

ATTACHMENT III

LEON COUNTY HEALTH DEPARTMENT

CIVIL RIGHTS CERTIFICATE

The applicant provides this assurance in consideration of and for the purpose of obtaining federal grants, loans, contracts (except contracts of insurance or guaranty), property, discounts, or other federal financial assistance to programs or activities receiving or benefiting from federal financial assistance. The provider agrees to complete the Civil Rights Compliance Questionnaire, DH Forms 946 A and B (or the subsequent replacement if adopted during the contract period), if so requested by the department.

The applicant assures that it will comply with:

1. Title VI of the Civil Rights Act of 1964, as amended, 42 U.S.C., 2000 Et seq., which prohibits discrimination on the basis of race, color or national origin in programs and activities receiving or benefiting from federal financial assistance.
2. Section 504 of the Rehabilitation Act of 1973, as amended, 29 U.S.C. 794, which prohibits discrimination on the basis of handicap in programs and activities receiving or benefiting from federal financial assistance.
3. Title IX of the Education Amendments of 1972, as amended, 20 U.S.C. 1681 et seq., which prohibits discrimination on the basis of sex in education programs and activities receiving or benefiting from federal financial assistance.
4. The Age Discrimination Act of 1975, as amended, 42 U.S.C. 6101 et seq., which prohibits discrimination on the basis of age in programs or activities receiving or benefiting from federal financial assistance.
5. The Omnibus Budget Reconciliation Act of 1981, P.L. 97-35, which prohibits discrimination on the basis of sex and religion in programs and activities receiving or benefiting from federal financial assistance.
6. All regulations, guidelines and standards lawfully adopted under the above statutes. The applicant agrees that compliance with this assurance constitutes a condition of continued receipt of or benefit from federal financial assistance, and that it is binding upon the applicant, its successors, transferees, and assignees for the period during which such assistance is provided. The applicant further assures that all contracts, subcontractors, subgrantees or others with whom it arranges to provide services or benefits to participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in connection with any of its programs and activities are not discriminating against those participants or employees in violation of the above statutes, regulations, guidelines, and standards. In the event of failure to comply, the applicant understands that the grantor may, at its discretion, seek a court order requiring compliance with the terms of this assurance or seek other appropriate judicial or administrative relief, to include assistance being terminated and further assistance being denied.

ATTACHMENT IV
FACILITIES UTILIZED BY THE COUNTY HEALTH DEPARTMENT

<u>Facility Description</u>	<u>Location</u>	<u>Owned By</u>
Headquarters Building Leon County Health Department	2964 Municipal Way Tallahassee, FL	Leon County
Roberts & Stevens Medical Services Center Leon County Health Department	1515 Old Bainbridge Rd. Tallahassee, FL	Leon County
Richardson-Lewis Clinic Leon County Health Department	872 W. Orange Avenue Tallahassee, FL	Leon County
Environmental Health Leon County Health Department	3401 W. Tharpe Street Tallahassee, FL	Leon County
Bond Community Health Subcontractor for Leon CHD	710 W. Orange Ave Tallahassee, FL	Leased
Neighborhood Health Services Subcontractor for Leon CHD	438 W. Brevard Tallahassee, FL	City of Tallahassee
Fairview Middle School Clinic	3415 Zillah Rd Tallahassee, FL	Leon County School Board
Griffin Middle School Clinic	800 Alabama Street Tallahassee, FL	Leon County School Board
Godby High School Clinic	1717 W. Tharpe Street Tallahassee, FL	Leon County School Board
Nims Middle School Clinic	723 W. Orange Avenue Tallahassee, FL	Leon County School Board
Belle Vue Middle School Clinic	2214 Belle Vue Way Tallahassee, FL	Leon County School Board
Deerlake Middle School Clinic	9902 Deerlake West Tallahassee, FL	Leon County School Board

ATTACHMENT V
LEON COUNTY HEALTH DEPARTMENT
SPECIAL PROJECTS SAVINGS PLAN

IDENTIFY THE AMOUNT OF CASH THAT IS ANTICIPATED TO BE SET ASIDE ANNUALLY FOR THE PROJECT.

<u>CONTRACT YEAR</u>	<u>STATE</u>	<u>COUNTY</u>	<u>TOTAL</u>
2002-2003	\$ _____	\$ _____	\$ _____
2003-2004	\$ <u>638,463</u>	\$ _____	\$ <u>638,463</u>
2004-2005	\$ _____	\$ _____	\$ _____
2005-2006	\$ _____	\$ _____	\$ _____
2006-2007	\$ _____	\$ _____	\$ _____
PROJECT TOTAL	\$ <u>638,463</u>	\$ _____	\$ <u>638,463</u>

SPECIAL PROJECT CONSTRUCTION/RENOVATION PLAN

PROJECT TITLE: Renovation of a new dental clinic
LOCATION: 812 Railroad Avenue
CATEGORY: NEW FACILITY ROOFING
RENOVATION x PLANNING STUDY
NEW ADDITION _____
SQUARE FOOTAGE: 5200

PROJECT SUMMARY: *Describe scope of work in reasonable detail.*
Renovation of a county own building to house a dental clinic. It will have twelve operatories, a conference room, server room, one office, front desk area, waiting room, break room and laboratory.

ESTIMATED PROJECT INFORMATION:

START DATE (*initial expenditure of funds*): Projected started in 02/03
COMPLETION DATE: 12/04/04
DESIGN FEES: \$ _____
CONSTRUCTION COSTS: \$ 638,463
FURNITURE/EQUIPMENT \$ _____
TOTAL PROJECT COST: \$ 638,463
COST PER SQ FOOT: \$ 123

ATTACHMENT VI

LEON COUNTY HEALTH DEPARTMENT

ESTIMATE OF ENVIRONMENTAL HEALTH FEES
FISCAL YEAR 2004 - 2005

DESCRIPTION	FEES DEPOSIT	DEPOSIT AMOUNT	OBJ. L4L6	OBJECT CODE	REVENUE CATEGORY	\$1 DCT	FUND	BUDGET	SI ENTY	PROGRAM COMPONENT	EXTRA REVENUE ACCUMULATED FUND
PUBLIC SWIMMING POOLS AND BATHING PLACES											
1. Annual Permit - Up to (and including) 25,000 gallons	100.00	90.00	XX-360	DK	001145	000100	CD	8K000	20-2-141001	64200700	** 1306000000
1a. Transfer to headquarters	10.00	99-910	SM	001205	000100	RV	K3000	10-2-021042	64200600	00	1302000000
2. More than 25,000 gallons	200.00	180.00	XX-360	DK	001145	000100	CD	8K000	20-2-141001	64200700	** 1306000000
2a. Transfer to headquarters	20.00	99-910	SM	001205	000100	RV	K3000	10-2-021042	64200600	00	1302000000
3. Exempted Condo Pools (over 32 units)	50.00	45.00	XX-360	DK	001145	000100	CD	8K000	20-2-141001	64200700	** 1306000000
3a. Transfer to headquarters	5.00	99-910	SM	001205	000100	RV	K3000	10-2-021042	64200600	00	1302000000
OTHER FEES											
Collected by the 13 delegated counties											
Broward, Dade, Duval, Hillsborough, Lee, Manatee,											
Collier, Palm Beach, Pinellas, Polk, Sarasota, Volusia, Escambia.											
Permits and variances for Okaloosa, Santa Rosa, Walton, Bay, Holmes, and Washington Counties are processed by Escambia											
County and variances and permits for Pasco County are processed by Pinellas County as follows:											
1. Plan review (new construction)	350.00	350.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	** 1306000000
2. Modification to a construction permit (permit issued and pool not finished with construction)	100.00	100.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	** 1306000000
3. Modification to a completed pool, one that has been in operation	150.00	150.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	** 1306000000
4. Plan application review for bathing place development	275.00	275.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	** 1306000000
5. Initial operating permit	150.00	150.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	** 1306000000
6. Variance applications	240.00	216.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	** 1306000000
6a. Transfer to Headquarters	24.00	99-910	SM	001205	000100	RV	K3000	10-2-021042	64200600	00	1302000000
All other counties are to send the fee to Bureau of Water Programs in Tallahassee or the Environmental Engineering section in Orlando as follows:											
1. Plan review (new construction)	350.00	350.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	** 1306000000
2. Modification to a construction permit (permit issued and pool not finished with construction)	100.00	100.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	** 1306000000
3. Modification to a completed pool, one that has been in operation	150.00	150.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	** 1306000000
4. Plan application review for bathing place development	275.00	275.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	** 1306000000
5. Initial operating permit	150.00	150.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	** 1306000000
6. Variance applications	240.00	216.00	XX-360	DK	001092	000100	CD	8K000	20-2-141001	64200700	** 1306000000

Attachment #

Page 23

DESCRIPTION	FEES	DEPOSIT	OBJE	REVENUE	ST	FUND	SUBJE	PROGRAM	AMOUNT	CODE	CATEGORY	GF-SF-FID	ENTRY	COMPONENT	AMOUNT
(FEES ARE PRORATED ON A QUARTERLY BASIS)															
1. Annual permit for 5 to 14 spaces	50.00	45.00	XX-354	DK	001113	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
1a. Transfer to headquarters		5.00	99-910	MP	001113	000100	RV	UQ000	10-2-021042	64200600	00	1302000000			
2. Annual permit for 15 to 171 spaces	3.50 per space		XX-354	DK	001113	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
2a. Transfer to headquarters		10%	99-910	MP	001113	000100	RV	UQ000	10-2-021042	64200600	00	1302000000			
3. Annual permit for 172 and above spaces	600.00	540.00	XX-354	DK	001113	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
3a. Transfer to headquarters		60.00	99-910	MP	001113	000100	RV	UQ000	10-2-021042	64200600	00	1302000000			
MIGRANT LABOR CAMPS															
1. Annual permit for facilities with 5-50 occupants	125.00	125.00	XX-352	DK	001139	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
2. Annual permit for facilities with 51-100 occupants	225.00	225.00	XX-352	DK	001139	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
3. Annual permit for facilities with over 100 occupants	500.00	500.00	XX-352	DK	001139	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
BIO-MEDICAL WASTE GENERATORS															
1. Initial permit (prorated after 3/31 for generator, storage and treatment)	55.00	55.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
2. Renewal of annual permit except physician office generating less than 25lbs/30 days) postmarked by October 1	55.00	55.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
3. Renewal of annual permit except physician office generating less than 25lbs/30 days) postmarked after October 1	75.00	75.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
4. Initial Transporter Registration (prorated after 3/31, includes 1 truck)	55.00	55.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
5. Initial Registration of Each Additional Truck	10.00	10.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
6. Annual Registration Renewal (postmarked by 10/01, includes 1 truck)	55.00	55.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
7. Annual Registration Renewal (postmarked after 10/01, includes 1 truck)	75.00	75.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
8. Annual Registration of Each Additional Truck	10.00	10.00	XX-364	DK	001140	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
TANNING FACILITIES															
1. Annual license fee	150.00	135.00	XX-369	DK	001144	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
1a. Transfer to headquarters		15.00	99-910	TN	001144	000100	RV	R9000	10-2-021042	64200600	00	1302000000			
2. Fee for each additional device	55.00	49.50	XX-369	DK	001144	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
2a. Transfer to headquarters		5.50	99-910	TN	001144	000100	RV	R9000	10-2-021042	64200600	00	1302000000			
3. Late fee	25.00	25.00	XX-369	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
BODY PIERCING															
1. Initial License (prorated quarterly)	150.00	135.00	XX-349	DK	001149	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
1a. Transfer to headquarters		15.00	99-910	iE	001149	000100	RV	PIERS	10-2-021042	64200600	00	1302000000			
2. Temporary Establishment	75.00	87.50	XX-349	DK	001149	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
2a. Transfer to headquarters		7.50	99-910	iE	001149	000100	RV	PIERS	10-2-021042	64200600	00	1302000000			
3. Annual Renewal License Fee	150.00	135.00	XX-349	DK	001149	000100	CD	8K000	20-2-141001	64200700	**	1306000000			
3a. Transfer to headquarters		15.00	99-910	iE	001149	000100	RV	PIERS	10-2-021042	64200600	00	1302000000			
4. Late fee	100.00	100.00	XX-349	DK	001149	000100	CD	8K000	20-2-141001	64200700	**	1306000000			

DESCRIPTION	TEE AMOUNT	DEPOSIT AMOUNT	ORG L/N&#	OBJ CODE	REVENUE CATEGORY	3 OCX	FUND CODE	BUDGET G-SE/FID	PROGRAM ENTITY	PROGRAM COMPONENT
FOOD ESTABLISHMENTS										
1. Annual Permit for Fraternals/Civic	160.00	144.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
1a. Transfer to headquarters		16.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600 00 1302000000
2. Annual Permit School Cafeteria Operating for 9 months or less	130.00	117.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
2a. Transfer to headquarters		13.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600 00 1302000000
3. Annual Permit School Cafeteria Operating for more than 9 months	160.00	144.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
3a. Transfer to headquarters		16.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600 00 1302000000
4. Annual Permit for Hospital/Nursing Food Service	210.00	189.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
4a. Transfer to headquarters		21.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600 00 1302000000
5. Annual Permit for Movie Theaters	160.00	144.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
5a. Transfer to headquarters		16.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600 00 1302000000
6. Annual Permit for Jails/Prisons	210.00	189.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
6a. Transfer to headquarters		21.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600 00 1302000000
7. Annual Permit for Bars/Lounges (Drink Service Only)	160.00	144.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
7a. Transfer to headquarters		16.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600 00 1302000000
8. Annual Permit for Residential Facilities	110.00	99.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
8a. Transfer to headquarters		11.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600 00 1302000000
9. Annual Permit for Child Care Centers without CAF license	85.00	76.50	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
9a. Transfer to headquarters		8.50	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600 00 1302000000
10. Annual Permit for Limited Food Service	85.00	76.50	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
10a. Transfer to headquarters		8.50	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600 00 1302000000
11. Annual Permit Other Food Service	160.00	144.00	XX-348	DK	001132	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
11a. Transfer to headquarters		16.00	99-910	FP	001132	000100	RV	10000	10-2-021042	64200600 00 1302000000
12. Plan Review \$35/hour		\$35/hour	XX-348	DK	001092	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
13. Food Worker Training (per person)	10.00	10.00	XX-348	DK	001092	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
14. Request for Inspection	40.00	40.00	XX-348	DK	001092	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
15. Re-Inspection (after the first reinspection)	30.00	30.00	XX-348	DK	001092	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
16. Late Renewal	25.00	25.00	XX-348	DK	001092	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
17. Alcoholic Beverage Inspection Approval	30.00	30.00	XX-348	DK	001092	000100	CD	8K000	20-2-141001	64200700 ** 1306000000

DESCRIPTION	FEES AMOUNT	DEPOSIT AMOUNT	ORG CODE	OBJE CT	LA/L5 CODE	REVENUE CATEGORY	SI CODE	OCA	FUND GF-S/FID	BUDGET ENTRY	PROGRAM COMPONENT	ESTIMATED EXPENDITURE FUND
16. Aerobic treatment unit operating permit (biennial)	100.00	92.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
16a. Transfer to headquarters		8.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000
17. Biennial operating permit fee for performance-based treatment systems. A prorated fee is to be charged beginning with second year of operation.	100.00	92.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
17a. Transfer to headquarters		8.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000
18. Review of application due to proposed amendments or changes after initial operating permit issuance for a performance-based treatment system	75.00	69.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
18a. Transfer to headquarters		6.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000
19. Tank manufacturer's inspection per annum	100.00	50.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
19a. Transfer to headquarters		50.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000
20. Septage disposal service permit per annum	75.00	69.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
20a. Transfer to headquarters		6.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000
21. Additional charge per pump out vehicle	35.00	32.20	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
21a. Transfer to headquarters		2.80	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000
22. Portable or temporary toilet service permit per annum	75.00	69.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
22a. Transfer to headquarters		6.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000
23. Additional charge per pump out vehicle	35.00	32.20	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
23a. Transfer to headquarters		2.80	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000
24. Septage stabilization facility inspection fee per annum	150.00	138.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
24a. Transfer to headquarters		12.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000
24. Septage disposal site evaluation fee per annum	200.00	184.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
24a. Transfer to headquarters		16.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000
24. Aerobic treatment unit maintenance entity permit per annum	25.00	23.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
24a. Transfer to headquarters		2.00	99-910	ST	001203	000100	RV	1E000	10-2-021042	64200600	00	1302000000
25. Variance application for a single family residence per each lot or building site	150.00	75.00	XX-361	DK	001135	000100	CD	8K000	20-2-141001	64200700	**	1306000000
25a. Transfer to headquarters		75.00	99-910	CR	001204	000100	RV	BY000	10-2-021042	64200600	00	1302000000
26. Variance application for a multi-family or commercial building per each building site	200.00	100.00	XX-361	DK	001135	000100	CD	8K000	20-2-141001	64200700	**	1306000000
26a. Transfer to headquarters		100.00	99-910	CR	001204	000100	RV	BY000	10-2-021042	64200600	00	1302000000
27. Inspection for construction of an injection well (FL Keys)	125.00	125.00	XX-361	DK	001092	000100	CD	8K000	20-2-141001	64200700	**	1306000000
FEE COLLECTED AT HEADQUARTERS - Onsite Sewage Program												
1. Application for Innovative product approval	500.00											For headquarters use only
2. Application for registration including initial examination	75.00											For headquarters use only
3. Initial registration	100.00											For headquarters use only
4. Renewal registration	100.00											For headquarters use only
5. Certificate of authorization each two year period	250.00											For headquarters use only

DESCRIPTION	FEES AMOUNT	DEPOSIT AMOUNT	URG. L415	OBJ-1 CODE	REVENUE CATEGORY	\$1 CODE	FUND GF-S-FID	BUDGET ENTITY	PROGRAM COMPONENT	EST. IN REVENUE FUNDING SOURCE
DRINKING WATER										4,000.00
1. First Year Public Water Annual Operation Permit and Construction Permit - Limited Use	75.00	67.50	XX-357	DK	001166	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
1a. Transfer to headquarters		7.50	99-910	64	001166	000100	RV	M5000	10-2-021042	64200600 00 1302000000
2. Second Year Public Water Annual Operation Permit - Limited Use	70.00	63.00	XX-357	DK	001166	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
2a. Transfer to headquarters		7.00	99-910	64	001166	000100	RV	M5000	10-2-021042	64200600 00 1302000000
3. Multi-Family Water Construction Permit - serving 3 or 4 non-rental residences	40.00	36.00	XX-357	DK	001165	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
3a. Transfer to headquarters		4.00	99-910	64	001165	000100	RV	M5000	10-2-021042	64200600 00 1302000000
4. Initial Operating Permit Fee After March 31 of Any Year	35.00	31.50	XX-357	DK	001166	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
4a. Transfer to headquarters		3.50	99-910	64	001166	000100	RV	M5000	10-2-021042	64200600 00 1302000000
5. Non-SDWA Lab Sample (Sample Collection/Review of Analytical Results/Health Risk Interpretation);										
Bacterial Sample Collection	40.00	40.00	XX-357	DK	001142	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
Chemical Sample Collection	50.00	50.00	XX-357	DK	001142	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
Combined Chemical/microbiological	55.00	55.00	XX-357	DK	001142	000100	CD	8K000	20-2-141001	64200700 * 1306000000
6. Reinspection of Multi-Family Water System	25.00	25.00	XX-357	DK	001092	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
7. Reinspection of Public Water System	40.00	40.00	XX-357	DK	001092	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
8. Delineated Area Clearance Fee	50.00	50.00	XX-357	DK	001092	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
9. Limited Use Commercial Registered System	15.00	15.00	XX-357	DK	001092	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
10. Limited Use Commercial Public Water System	25.00	25.00	XX-357	DK	001092	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
Operating Permit Family Day Care Establishment										
11. Limited Use Commercial Public Water System Operating Permit Family Day Care Establishment After March 31 of Any Year.	15.00	15.00	XX-357	DK	001092	000100	CD	8K000	20-2-141001	64200700 ** 1306000000
Safe Drinking Water Act (Delegated Counties)										
1. Construction permit for each Category I through III treatment plant, as defined in Rule 62-599.310, F.A.C., with treatment other than disinfection only.										
a. Treatment plant - 5 MGD and above	7,500.00	7,500.00	XX-358	WC	001211	000100	CD	SDWCH	20-2-141001	64200700 ** 1306000000
b. Treatment plant - 1 MGD up to 5 MGD	6,000.00	6,000.00	XX-358	WC	001211	000100	CD	SDWCH	20-2-141001	64200700 ** 1306000000
c. Treatment plant - 0.25 MGD up to 1 MGD	4,000.00	4,000.00	XX-358	WC	001211	000100	CD	SDWCH	20-2-141001	64200700 ** 1306000000
d. Treatment plant - 0.1 MGD up to .25 MGD	2,000.00	2,000.00	XX-358	WC	001211	000100	CD	SDWCH	20-2-141001	64200700 ** 1306000000
e. Treatment plant - up to 0.1 MGD	1,000.00	1,000.00	XX-358	WC	001211	000100	CD	SDWCH	20-2-141001	64200700 ** 1306000000
2. Construction permit for each Category IV treatment plant, as defined in Rule 62-599.310, F.A.C., with treatment other than disinfection only.										

DESCRIPTION	FEES AMOUNT	DEPOSIT AMOUNT	ORG LANS	OBJ CODE	REVENUE CATEGORY	SI CODE	CDA	FUND GF-SI-FID	BUDGETED ENTITY	PROGRAM COMPONENT	ESTIMATED REVENUE ACCRUING TO CASH FUND
a. Treatment plant - 5 MGD and above	7,500.00	7,500.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
b. Treatment plant - 1 MGD up to 5 MGD	6,000.00	6,000.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
c. Treatment plant - 0.25 MGD up to 1 MGD	4,000.00	4,000.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
d. Treatment plant - 0.1 MGD up to .025 MGD	2,000.00	2,000.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
e. Treatment plant - 0.01 up to 0.1 MGD	1,000.00	1,000.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
f. Treatment plant - up to 0.01 MGD	400.00	400.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
3. Construction permit for each Category V treatment plant, as defined in Rule 62-699.310, F.A.C., - Disinfection Only											
a. Treatment plant - 5 MGD and above	5,000.00	5,000.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
b. Treatment plant - 1 MGD up to 5 MGD	3,000.00	3,000.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
c. Treatment plant - 0.25 MGD up to 1 MGD	1,000.00	1,000.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
d. Treatment plant - 0.1 MGD up to .025 MGD	500.00	500.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
e. Treatment plant - up to 0.1 MGD	300.00	300.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
4. Distribution and transmission systems, including raw water lines into the plant, except those under general permit.											
a. Serving a community public water system	500.00	500.00	XX-358	WC 1211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
b. Serving a non-transient non-community public water systems	350.00	350.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
c. Serving a non-community public water system	250.00	250.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
5. Construction permit for each public water supply well											
a. Well located in a delineated area pursuant to Chapter 62-524, F.A.C.	500.00	500.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
b. Any other public water supply well	250.00	250.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
6. Major modifications to systems that alter the existing treatment without expanding the capacity of the system and are not considered substantial changes pursuant to Rule 62-4.050(7) below.											
a. 1 MGD and above	2,000.00	2,000.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
b. Up to 1 MGD	1,000.00	1,000.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
c. 0.01 up to 1 MGD	500.00	500.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
d. Up to 0.01 MGD	100.00	100.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
e. Lead and Copper Corrosion Fee	100.00	100.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
7. Minor modifications to systems that result in no change in the treatment or capacity.											
a. 1 MGD and above	300.00	300.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
b. Up to 0.1 MGD	100.00	100.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
8. Fines and Forfeitures	Variable	Variable	XX-358	WC 012020	001200	CD SDWCH	20-2-141001	64200700	**	1306000000	
9. General Permit Fee for any General Permit not specifically listed:	100.00	100.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
a. General Permits requiring Professional Engineer or Professional Geologist certification	250.00	250.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
a. General Permits not requiring Professional Engineer or Professional Geologist certification	100.00	100.00	XX-358	WC 001211	000100	CD SDWCH	20-2-141001	64200700	**	1306000000	
Professional Materials Licenses - General											
Radioactive Materials Licenses - General											

DESCRIPTION	FEES	DEPOSITS	ORG EO CODE	OBJECT LINES	REVENUE SI	CDA	FUND	BUDGET	IBI COMPONENT	ATTACHMENT CATEGORY	ATTACHMENT ITEM
	AMOUNT	AMOUNT			CATEGORY		GT-SP-FD	ENTITY			
1. Annual fee: static elimination devices	\$25.00									For headquarters use only	
2. Annual fee: measuring, gauging and control devices	\$25.00									For headquarters use only	
3. Annual fee: in vivo testing license	\$125.00									For headquarters use only	
4. Annual fee: in vitro testing license	\$125.00									For headquarters use only	
5. Annual fee: depleted uranium license	\$125.00									For headquarters use only	
Radioactive Materials Licenses - Specific Application Fees											
1. Source Material:											
a. Concentration of uranium from phosphate ones for the production of uranium as "yellow cake" or powdered solid;	\$6,907									For headquarters use only	
b. Concentration of uranium from phosphate ones for the production of "green cake" or equivalent, moist or solid;	\$3,768									For headquarters use only	
c. All other specific source material licenses excluding depleted uranium used as shielding and counterweights.	\$544									For headquarters use only	
2. Special Nuclear Material (SNM):											
a. SNM in sealed sources contained in devices in measuring systems;	\$653									For headquarters use only	
b. SNM not sufficient to form a critical mass, except as in 2.a., 2.c. and 5.e.	\$1,340									For headquarters use only	
c. SNM to be used as calibration and reference sources.	\$206									For headquarters use only	
3. Byproduct, naturally occurring or accelerator produced material.											
a. Processing or manufacturing for commercial distribution or industrial uses;	\$2,923									For headquarters use only	
b. Processing or manufacturing and distribution of radiopharmaceuticals. This category includes radiopharmacies.	\$2,560									For headquarters use only	
c. Industrial radiography performed only in an approved shielded radiography installation,	\$1,558									For headquarters use only	
d. Industrial radiography performed only at the address indicated in the license, or at temporary job sites of the licensee;	\$1,643									For headquarters use only	
e. Radioactive materials in sealed sources for irradiation of materials where the source is not removed from the shield and is less than 10,000 curies:	\$605									For headquarters use only	
f.(i) Radioactive materials in sealed sources for irradiation of materials when the source is not removed from the shield and is greater than 10,000 curies and less than 100,000 curies, or where the source is less than 100,000 curies and is removed from the shield;	\$1,414									For headquarters use only	
f.(ii) Radioactive materials in sealed sources for irradiation of materials when the source is equal to or greater than 100,000 curies and less than 1,000,000 curies;	\$3,659									For headquarters use only	
f.(iii) Radioactive materials in sealed sources for irradiation of materials when the source is greater than 1,000,000 curies;	\$9,780									For headquarters use only	
g. Distribution of items containing radioactive materials to											

**Must use County Health Department IBI (01-67)

DESCRIPTION	FEE AMOUNT	DEPOSIT AMOUNT	GROSS AMOUNT	L4/L5 CODE	OBJECT CATEGORY	REVENUE CODE	SI	DOA	FUND CODE	GFS-FID	BUDGET ENTITY	PROGRAM COMPONENT	ESTIMATED REVENUE ACCORDING TO CHD TRUST FUND
persons under a general license;	\$1,643												
h. Distribution of exempt quantities or items containing naturally occurring or accelerator produced material to persons exempt from licensing:	\$1,643												
i. Well logging													
(I) Sealed sources or sub-surface tracer studies	\$1,135												
(II) Sub-surface tracer studies and sealed sources	\$1,436												
j. Nuclear Laundry:	\$3,200												
k. Industrial or medical research and development;	\$1,184												
l. (I) Fixed and portable gauging devices	\$605												
l. (II) In Vitro and clinical laboratory	\$725												
l. (III) Academic	\$978												
m. Possession of uranium or thorium, or their decay products, as a result of mining or processing	\$978												
n. All other specific licenses except as otherwise noted	\$725												
m. Licenses of broad scope													
(I) Academic	\$3,200												
(II) Medical	\$3,200												
(III) Industrial or Research and Development	\$3,200												
n. Gas chromatography devices;	\$434												
o. Reference or calibration sources equal to or less than one millicurie total;	\$314												
p. Nuclear service licenses, such as leak testing, instrument calibration, etc.;	\$518												
q. Waste disposal or processing													
a. Commercial waste disposal or treatment facilities, including burial or incineration;	\$275,842												
b. All other commercial facilities involving compaction, repackaging, storage or transfer;	\$27,084												
c. Commercial treatment of radioactive materials for release to unrestricted areas.	\$5,760												
d. Medical use.													
a. Teletherapy or high dose rate remote after loading devices;	\$1,414												
b. Medical institutions including hospitals, except 5.a. and 5.e.;	\$1,643												
c. Private practice physicians except 5.a. and 5.d.;	\$1,184												
d. Private practice physicians using only strontium 90 eye applicators, materials authorized by Rule 64E-5.531, F.A.C., and materials authorized by Rule 64E-5.630; F.A.C.	\$605												
e. Nuclear powered pacemakers;	\$434												
f. Mobile nuclear medicine services;	\$1,414												
g. Civil defense.	\$544												
7. Device, product, or sealed source safety evaluation.													

Attachment #

Page 33 of 38

DESCRIPTION	AMOUNT	DEPOSIT AMOUNT	ORG L4/L5	EO CODE	CATEGORY	REVENUE S/C/CAC	FUND	SUBJECT Gr-S/FD	PROGRAM ENTITY	COMPONENT	Ex-Amt. Revenue Accounting C/H/D Trans Fund
a. Device evaluation, per device;	\$1,208										
b. Sealed source design, per source.	\$528										
Radioactive Materials Licensees - Specific Annual Fees											
1. Source Material											
a. Concentration of uranium from phosphate ores for the production of uranium as "yellow cake" or powdered solid;	\$11,942										For headquarters use only
b. Concentration of uranium from phosphate ores for the production of "green cake" or equivalent, moist or solid;	\$7,439										For headquarters use only
c. All other specific source material licenses excluding depleted uranium used as shielding and counterweights.	\$229										For headquarters use only
2. Special Nuclear Material (SNM).											
a. SNM in sealed sources contained in devices used in measuring systems;	\$518										For headquarters use only
b. SNM not sufficient to form a critical mass, except as in 2.a., above, and 2.c. and 5.e. below.	\$1,944										For headquarters use only
c. SNM to be used as calibration and reference sources.	\$109										For headquarters use only
3. Byproduct, naturally occurring or accelerator produced material.											
a. Processing or manufacturing for commercial distribution or industrial uses;	\$2,802										For headquarters use only
b. Processing or manufacturing and distribution of radiopharmaceuticals. This category includes radiopharmacies.	\$3,840										For headquarters use only
c. Industrial radiography performed only in an approved shielded radiography installation.	\$2,161										For headquarters use only
d. Industrial radiography performed only at the address indicated in the license, or at temporary job sites of the licensee;	\$2,657										For headquarters use only
e. Radioactive materials in sealed sources for irradiation of materials where the source is not removed from the shield and is less than 10,000 curies;	\$605										For headquarters use only
f. (I) Radioactive materials in sealed sources for irradiation of materials when the source is equal to or greater than 100,000 curies and less than 1,000,000 curies;	\$3,961										For headquarters use only
(II) Radioactive materials in sealed sources for irradiation of materials when the source is greater than 1,000,000 curies;	\$4,398										For headquarters use only
g. Distribution of items containing radioactive materials to persons under a general license;	\$2,150										For headquarters use only
h. Distribution of exempt quantities or items containing naturally											

Attachment #

Page

34

34

DESCRIPTION	FEES AMOUNT	DEPOSIT AMOUNT	ORG LINES	OBJECT CODE	REVENUE CATEGORY	SI CODE	CCA	FUND GR-S/FID	BUDGET ENTITV	PROGRAM COMPONENT	According to CBO Trust Fund
occurring or accelerator produced material to persons exempt from licensing:	\$2,150										For headquarters use only
i. Well logging											For headquarters use only
(I) Sealed sources or sub-surface tracer studies	\$1,498										For headquarters use only
(II) Sub-surface tracer studies and sealed sources	\$1,594										For headquarters use only
i. Nuclear Laundry,											For headquarters use only
k. Industrial or medical research and development:											For headquarters use only
(I) Fixed and portable gauging devices	\$5,651										For headquarters use only
(II) In Vitro and clinical laboratory	\$1,474										For headquarters use only
(III) Academic	\$666										For headquarters use only
(IV) Possession of uranium or thorium, or their decay products, as a result of mining or processing	\$918										For headquarters use only
(V) All other specific licenses except as otherwise noted	\$1,171										For headquarters use only
m. Licenses of broad scope											For headquarters use only
(I) Academic	\$7,346										For headquarters use only
(II) Medical	\$5,474										For headquarters use only
(III) Industrial or Research and Development	\$4,568										For headquarters use only
n. Gas chromatography devices;	\$314										For headquarters use only
o. Reference or calibration sources equal to or less than one millircurie total;	\$132										For headquarters use only
p. Nuclear service licenses, such as, leak testing, instrument calibration, etc.;	\$410										For headquarters use only
4. Waste disposal or processing											For headquarters use only
a. Commercial waste disposal or treatment facilities, including burial or incineration:	\$250,555										For headquarters use only
b. All other commercial facilities involving compacting, repackaging, storage or transfer;	\$24,371										For headquarters use only
c. Commercial treatment of radioactive materials for release to unrestricted areas.	\$3,735										For headquarters use only
5. Medical use.											For headquarters use only
a. Teletherapy or high dose rate remote after loading devices;	\$1,378										For headquarters use only
b. Medical institutions including hospitals, except category 5.a. and 5.e.											For headquarters use only
c. Private practice physicians except category 5.a. and 5.d.;	\$1,908										For headquarters use only
d. Private practice physicians using only strontium 90 eye applicators, materials authorized by Rule 64E-5.531, F.A.C., and materials authorized by Rule 64E-5.630, F.A.C.	\$1,340										For headquarters use only
e. Nuclear powered pacemakers;	\$748										For headquarters use only
f. Mobile nuclear medicine services	\$286										For headquarters use only
6. Civil defense.	\$1,625										For headquarters use only
7. Device, product, or sealed source safety evaluation.	\$321										For headquarters use only
a. Device evaluation, per device:	NONE										

Attachment

Page 35 of 38

DESCRIPTION	FEE	DEPOSIT	ORG	EO	OBJECT	REFERENCE	S	OCA	CATEGORY	PROGRAM	BUDGET	FUND	GF ST FB	ENTITY	COMPONENT	LINE
b. Sealed source design, per source.																
Reclamation Fee	NONE	5% of annual licensing fee														
X-Ray Machine Annual Registration Fees																
1. Medical, chiropractic, osteopathic, or naturopathic machines																
- First tube	\$145															
Each additional tube	\$85															
2. Veterinary machines - First tube	\$50															
Each additional tube	\$34															
3. Educational or industrial machines - First tube	\$47															
Each additional tube	\$23															
4. Dental or podiatry machines - First tube	\$21															
Each additional tube	\$11															
5. Medical accelerators	\$268															
Each additional tube	\$148															
6. Non-medical accelerators	\$81															
Each additional tube	\$48															
Technologic Technologist Certifications																

DESCRIPTION	FILE AMOUNT	DEPOSIT AMOUNT	OBJ- CODE	REVENUE CATEGORY	SP CODE	OCA	FUND	BUDGET GFSFID	PROGRAM ENTITY	BI COMPONENT	ACCTNG TO CHD Trans Fund
1. Application and study guide (applicant also pays whatever fee the testing service charges)	\$75									For headquarters use only	
2. Application without study guide (applicant also pays whatever fee the testing service charges)	\$50									For headquarters use only	
3. Application through endorsement (no test needed)	\$45									For headquarters use only	
4. Repeat examinations (applicant also pays whatever fee the testing service charges)	\$35									For headquarters use only	
5. Renewal - first category	\$55									For headquarters use only	
Each additional category	\$40									For headquarters use only	
6. Change in status from active to inactive	\$40									For headquarters use only	
7. Late renewal fee	\$100									For headquarters use only	
8. Duplicate certificate	\$10									For headquarters use only	
9. Listings and mailing labels, per name	\$0.05									For headquarters use only	
Setup charge	\$55									For headquarters use only	
10. Study guide	\$25									For headquarters use only	
Pre and Post Mining Fees											
1. Gamma radiation exposure measurement (1 per acre)	\$7.50									For headquarters use only	
2. Soil characterization measurement (1 per 20 acres)	\$320									For headquarters use only	
3. Air monitoring measurements	\$165									For headquarters use only	
4. Surface and ground water measurements	\$300									For headquarters use only	
Low-Level Radioactive Waste Inspection Fee											
Cubic foot of waste shipped (minimum fee = \$50 per shipment)	\$1.95									For headquarters use only	
Low-Level Radioactive Waste Transport Fee											
Annual transport permit	\$100									For headquarters use only	
Water Analysis Fees											
1. Gross alpha	\$28									For headquarters use only	
2. Gross beta	\$28									For headquarters use only	
3. Radium 226	\$110									For headquarters use only	
4. Radium 228	\$110									For headquarters use only	
5. Uranium	\$110									For headquarters use only	
6. Tritium	\$40									For headquarters use only	
7. Strontium 89, strontium 90	\$95									For headquarters use only	
8. Iodine 131	\$110									For headquarters use only	
9. Photon emitters	\$128									For headquarters use only	
Laboratory Certification Fees											
1. Safe drinking water certification	\$500									For headquarters use only	
2. Clean water certification	\$500									For headquarters use only	
3. Resource conservation recovery	\$500									For headquarters use only	
4. Field of testing application	\$200									For headquarters use only	

ATTACHMENT VII

Attachment #
Page 38 of 38

Primary Care

"Primary Care" as conceptualized for the county health departments and for the use of categorical Primary Care funds (revenue object code 015011) is defined as:

"Health care services for the prevention or treatment of acute or chronic medical conditions or minor injuries of individuals which is provided in a clinic setting and may include family planning and maternity care."

Indicate below the county health department programs that will be supported at least in part with categorical Primary Care funds this contract year:

- Comprehensive Child Health (229/29)
- Comprehensive Adult Health (237/37)
- Family Planning (223/23)
- Maternal Health/IPO (225/25)
- Laboratory (242/42)
- Pharmacy (241/93)
- Other Medical Treatment Program (please identify) _____

Describe the target population to be served with categorical Primary Care funds.

Indigent, non-insured, adults and children.

Does the health department intend to contract with other providers for the delivery of primary health care services using categorical (015011) Primary Care funds? If so, please identify the provider(s), describe the services to be delivered, and list the anticipated contractual amount by provider. In addition, contract providers are required to provide data on patients served and the services provided so that the patients may be registered and the service data entered into HCMS.

1. Leon CHD contracts with Neighborhood Health Services for \$191,250.00 to provide 2470 adult primary care service visits and 80 child primary care service visits.
2. Leon CHD contracts with Bond Community Health Center for \$191,250.00 to provide 2470 adult primary care service visits and 80 child primary care service visits.
3. Leon CHD also contracts with Capital Medical Society Foundation's We Care Network for \$15,967.00 to provide case management services to eligible clients who require specialty medical care.